2012 Update on Legal Hurdles for Telemedicine

- ➤ <u>Licensure</u>—Federal legislation proposed to allow providers to serve healthcare needs of VA even where provider does not have a license in the jurisdiction where VA patient is located (similar Federal legislation for service members using DOD healthcare facilities was passed in 2011).
- Prescribing medication without in-person exam—Medical Boards continue to look at additional regulations/requirements to prescribing without an in-person exam.
- FDA/Medical Device—FDA's proposed guidelines on mobile medical applications may require more telehealth and m-health devices and IT to obtain FDA certification. Final guidelines expected late 2012.



2012 Update on Legal Hurdles for Telemedicine (cont.)

- Credentialing and Privileging—CMS passed credentialing " by-proxy" style approach in mid-2011 and Joint Commission adopted similar rules at end of 2011. Many States still require credentialing and privileging by each of the originating site and the distance site hospitals for the same provider leading to duplicative efforts and unnecessary costs.
- Reimbursement Coverage—CMS expanded list of services covered as a telehealth services (including, alcohol abuse screening, counseling, and intervention and behavioral therapy and counseling for cardiovascular disease and obesity). CMS coverage remains limited to rural areas. 2 more States (MD & VT) passed legislation requiring private payors to cover telemedicine services. See next slide for more details.



Current Environment Supportive Legislation

➤ 14 states passed legislation mandating private payer reimbursement of telemedicine services:

-Louisiana (1995) -California (1996)

-Oklahoma (1997) -Texas (1997)

-Hawaii (1999) -Kentucky (2000)

-Colorado (2001) -Georgia (2006)

-Maine (2009) -New Hampshire (2009)

-Oregon (2009) -Virginia (2010)

-Vermont (2012) -Maryland (effective Oct. 2012)

> Several others have pending legislation on the topic:

-Michigan (HB 5408) -Ohio (SB 28)

-Arizona (2666)



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